

ISSUE SLIP STAPLE AREA (for additional cross references)

9-8-00

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | LW | 68904 | 6/28/00 |
| O.I.P.E. CLASSIFIER | | 43 | 7/5/00 |
| FORMALITY REVIEW | 2A | JC 583 | 38/11/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 12/9/02 |
| 2 | ✓ | ✓ | 5/16/03 |
| 3 | ✓ | ✓ | 1/2/04 |
| 4 | ✓ | ✓ | |
| 5 | ✓ | ✓ | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
| 10 | ✓ | ✓ | |
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| 49 | ✓ | ✓ | |
| 50 | ✓ | ✓ | |

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 51 | ✓ | ✓ | 12/9/02 |
| 52 | ✓ | ✓ | 5/16/03 |
| 53 | ✓ | ✓ | 1/2/04 |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)